Birth Control Options Postpartum

[insert presenter info]

Sexual Health and Birth Control

- Discuss birth control before delivery
- Many effective options are available
- Breastfeeding is not an effective birth control method
- Many reliable methods are safe while breastfeeding

Birth Control and Fertility

- Not breastfeeding, first period between 4 to 6 weeks after delivery
- Full breastfeeding, may be delayed up to six months
- Can get pregnant before period begins again
- Choose reliable BC prior to resuming intercourse

Choosing a Birth Control Method

- Every method has advantages and disadvantages
- ONLY abstinence is fool proof
- Most methods do not protect against sexually transmitted diseases (STDs)

Unreliable Methods

- Breastfeeding
- Feminine hygiene products
- Douching
- Urinating after sex
- Withdrawal of the penis

Oral Contraceptives (OCs)



- How do they work?
 - Estrogen and Progesterone work together to suppress ovulation
 - Thickens cervical mucus
 - Without ovulation, a woman is not able to get pregnant

OCS

- Advantages
 - Very effective
 - Can be started 2 weeks postpartum
 - Nothing is required at the time of intercourse
 - Reduces risk of ovarian cancer, uterine cancers
 - Reduces menstrual cramps
 - Decreases effects of endometriosis and ovarian cysts

OCS

- Disadvantages
 - Not recommended in first weeks of breast feeding
 - May decreases breast milk supply and change composition
 - Must be taken daily
 - Who is at risk for blood clots

Ortho Evera "the patch"



Works same as OCs except hormones absorbed through skin

- Advantages
 - Replace only once a week
 - Same as OCs

- Disadvantages
 - May cause skin irritation
 - Same as OCs, except frequency of dosage

Nuva Ring

Works like OCs except hormones absorbed through vagina

- Advantages
 - Replace only every three weeks
 - Same as OCs

- Disadvantages
 - Frequent UTI's
 - Same as OCs

Intrauterine System (IUD) containing Progesterone

- Intrauterine System containing Progesterone (Mirena®)
 - Inserted into the uterus
 - Offers protection against pregnancy for 1-5 years
- Uterus must return to pre-pregnant size before use
- Discuss with provider before postpartum visit if interested

Other Hormonal Options: Progestin-only birth control pills (POPS)

For avoiding estrogen in combined oral contraceptives

- Advantages
 - May become pregnant quickly when stop
 - Women who cannot take estrogen may use
 - Can use while breastfeeding

- Disadvantages
 - Must take at same time each day to reduce risk of pregnancy or irregular bleeding

Other Hormonal Options: | Mini Pill

- Low dose progesterone-only pill
- If breastfeeding, can start 3 weeks after delivery
- weeks after delivery Advantage
 - Ideal for breastfeeding mothers
 - Does not decrease milk production

- Must take at same time every day or ineffective
- May cause irregular periods

Other Hormonal Options: Depo Prevera



Injection every 12 weeks

- Advantages
 - Can use while breastfeeding
 - Very effective
 - Start immediately postpartum

- Disadvantages
 - Irregular bleeding for 2-3 injection periods
 - Return of fertility takes 12-18 months
 - Long term use may lead to osteoporosis

Intrauterine Device (JUD)



- T-shaped device placed in the uterine cavity
- Long term reversible birth control
- Causes increase in white blood cells and thickens cervical mucus
- Stops sperm from reaching the egg
- In place for 5-10 years

JUD

- Advantages
 - Very effective
 - Good for long term birth control
 - Can be removed at any time
 - Return to fertility immediate
 - Do not have to think about prior to intercourse

JUD

- Disadvantages
 - Exposure to some STD's can turn into a pelvic infection
 - Increases risk of a tubal pregnancy
 - Increase in menstrual bleeding and cramping
 - Increase vaginal discharge
- Discuss with provider prior to your postpartum visit if interested

Barrier Method: Cervical Cap



- Advantages
 - Breastfeeding not effected
 - No hormonal side effects

- Disadvantages
 - Place at least 20 min prior to intercourse
 - Must be fitted by health care provider
 - Spermicide needed
 - Only 4 sizes
 - Made of latex

Barrier Method: Diaphragm



- Advantages
 - Breastfeeding not effected
 - Non-latex available
 - No hormonal side effects

- Disadvantages
 - Need to be fitted by health care provider
 - Must place prior to intercourse
 - Spermicide needed
 - Must refit if lose or gain more than 10 pounds

Barrier Method: Condoms



- Advantages
 - Breastfeeding not effected
 - No prescriptions needed
 - Latex or non-latex
 - Some protection from STD's

- Disadvantages
 - Placement prior to intercourse every time
 - Spermicide increases effectiveness

Spermicides

- Place less than one hour before intercourse
- Many forms:
 - Film "VCF"
 - Gel
 - Foam
 - Cream
 - Suppository
 - Tablet





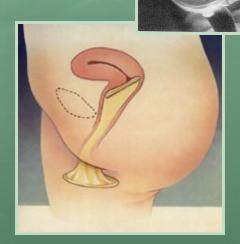
Spermicides

- Advantages
 - No prescription needed
 - Side effects are local, if any

- Disadvantages
 - High failure rate
 - Allergic reactions
 - Increased yeast infections

Barrier Method: Female Condoms

- Advantages
 - Breastfeeding not effected
 - Place prior to intercourse every time
 - Prescription not needed
 - Some protection against STDs



- Disadvantages
 - Difficult to use
 - Spermicides increase effectiveness
 - Is non-latex
 - Relatively expensive

Permanent: Tubal Ligation

- Good if not desiring future pregnancies
- Paperwork needs to be signed before delivery if having postdelivery
- Reversal is expensive
- Reversal has poor success rates

Permanent: Vasectomy

- Good if not desiring future pregnancies
- Outpatient procedure, takes about 15 minutes
- Uses local anesthetic
- Reversal of vasectomy is expensive
- Reversal success rates decrease with time

Lactational Amenorrhea Method (LAM)

- For breastfeeding women
- Can be effective for up to 6 months IF:
 - Baby's diet includes no formula or food
 - Baby fed every 4 hours or less during day and every 6 hours at night
- Not 100% effective
- Use of condom with foam and/or withdrawal increases effectiveness

Emergency Contraception (ECP)



- Emergency contraception pills: If barrier method fails or no contraception is used
- Can be taken up to 120 hours after to prevent pregnancy
 - Hotline: 1-888-NOT-2-LATE
- Emergency IUD insertion within seven days of unprotected intercourse is 99.9% effective

References

- Planned Parenthood Federation of America
- American College of Obstetricians and Gynecologists

Acknowledgements

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